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The National Women's Health Information Center

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Frequently Asked Questions about Fibromyalgia

What is fibromyalgia (FM)?

Fibromyalgia (FM), is a disorder with symptoms of widespread muscle pain, fatigue (feeling tired and having low energy), and multiple tender points. "Tender points" refers to tenderness that occurs in certain areas of the body. Tender points are located in the neck, spine, shoulders, hips and knees and are painful when pressure is applied to them. People with FM often have sleep problems and may have many other symptoms. FM is not thought to be an *autoimmune disease* at this time, but it shares symptoms with several autoimmune illnesses.

What are the symptoms of fibromyalgia?

The main symptoms of FM include:

- Muscle pain in many areas of the body.
- Fatigue.
- "Tender points" in specific areas of the body that are painful when pressure is applied to them.

In addition to these symptoms, other common symptoms of FM include:

- Sleep problems. People with FM often have poor quality sleep that is not refreshing.
- Depression or anxiety.
- Stiffness, especially in the morning.
- Problems with thinking and concentrating.
- Headaches, jaw pain, or abdominal pain.
- Digestive problems such as bloating and trouble swallowing.
- Bladder problems such as *interstitial cystitis*.
- Feelings of numbness or tingling in hands, feet, or other areas.

Other conditions sometimes found in FM patients include irritable bowel syndrome (IBS), restless legs syndrome (RLS), periodic limb movement disorder (PLMD), *temporomandibular* joint (TMJ) pain, and *myofascial* pain syndrome (MPS).

How common is fibromyalgia? Who is mainly affected by it?

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) estimates that the number of adults in the United States with FM is about 3.7 million. Other organizations estimate that the number may be as high as 8 million. It mainly occurs in women of childbearing age, but children, the elderly, and men are sometimes diagnosed with FM.

What causes fibromyalgia?

Although the cause of FM is unknown, researchers have several theories about causes or triggers of the disorder. Some scientists believe that an injury or trauma may sometimes cause the syndrome. This injury may affect the central nervous system. FM may be linked to muscle changes that cause fatigue and decreased strength. Others believe that an infection caused by a virus or other agent may trigger FM in susceptible people.

Other possible factors in FM include psychological stress, hormonal changes, or other changes in body chemicals such as *serotonin* and *Substance P*. The hormones produced by the *hypothalamus-pituitary-adrenal* (HPA) axis may be important in FM. Sleep problems, so common in people with FM, may be a cause as well as a symptom of FM. Increased sensitivity to and perception of pain seems to be involved.

How is fibromyalgia diagnosed?

Fibromyalgia is hard to diagnose because many of the symptoms are like those of other disorders. There is no lab test for FM. The American College of Rheumatology (ACR) has developed criteria for FM. According to ACR criteria, a person is considered to have FM if he or she has:

- widespread pain for at least 3 months, and
- tenderness in at least 11 of 18 specific tender point sites in the neck, spine, shoulders, hips, and knees.

There is some controversy about the criteria for diagnosing FM. Some experts believe that it is not necessary to have at least 11 tender points for diagnosis, or pain that affects all segments of the body at the same time.

How is fibromyalgia treated?

If you have FM, you may need to work with your doctor to find a treatment plan that helps you. FM patients may benefit from a combination of exercise, medicine, physical therapy, and relaxation. There are medicines that may help elevate mood, improve quality of sleep, reduce pain, and relax muscles.

Drug therapies used in fibromyalgia include:

- Drugs for pain. These include aspirin, ibuprofen, and other pain relievers.
- *Antidepressants*. These drugs can help relieve depression and may also help with sleep. Low doses of certain tricyclic antidepressants and the newer serotonin boosters (SSRIs) are often used.

- Drugs for anxiety (*anxiolytics*). These medicines can help with anxiety and with sleep.
- Muscle relaxants such as *cyclobenzaprine*.

Exercise, including low-impact aerobic exercise (such as walking and swimming) and strength training have been found to be helpful in FM patients. But it is important to pace yourself and not overdo it. Exercise may help you increase your flexibility and strength, help with pain and sleep, and make you feel better in general. Heat and massage may also give short-term relief from pain and stiffness.

Cognitive behavioral therapy (focuses on helping you develop ways to manage your illness) is another form of treatment that can be helpful. Stress reduction and a healthy lifestyle are also important.

What is the difference between fibromyalgia and chronic fatigue syndrome?

Chronic fatigue syndrome (CFS) and FM have many similarities. In fact, it is not uncommon for a person to have both conditions. Some experts believe that the two conditions are variations of the same disorder. Both CFS and FM have pain and fatigue as symptoms.

The main symptom of CFS is extreme fatigue. CFS seems to often begin following an episode of flu-like symptoms. People with CFS only do not have the tender points that people with FM have. The criteria for diagnosing CFS are chronic fatigue for at least 6 months plus 4 or more other typical CFS symptoms such as muscle pain, headaches, sore throat, tender lymph nodes, problems with thinking, and sleep problems.

What research is being done on fibromyalgia?

Researchers are studying the ways that the nervous system, the *endocrine* (hormonal) system, and the adrenal glands interact in FM patients. Studies have shown that abnormally low levels of the hormone *cortisol* (made by the adrenal glands) may be associated with FM. People whose bodies make too little cortisol have many of the same symptoms as people with FM.

Other researchers are looking at how specific brain structures are involved in the painful symptoms of FM. Scientists are studying the causes of a post-Lyme disease syndrome as a model for FM. Some patients develop a FM-like condition following Lyme disease, an infectious disorder associated with arthritis and other symptoms.

Another area of research is related to behavioral factors in FM. It is hoped that these studies will increase understanding about FM and may suggest new ways to treat the disorder.

For more information...

For more information about Fibromyalgia by contacting the National Women's Health Information Center at (800) 994-9662 or contact the following organizations:

National Institute of Arthritis and Musculoskeletal and Skin Diseases

Phone Number(s): (877) 226-4267 or (301) 495-4484

Internet Address: <http://www.niams.nih.gov>

American Autoimmune Related Diseases Association

Phone Number(s): (800) 598-4668 Literature Requests, (810) 776-3900

Internet Address: <http://www.aarda.org>

American College of Rheumatology

Phone Number(s): (404) 633-3777

Internet Address: <http://www.rheumatology.org>

Fibromyalgia Network

Phone Number(s): (800) 853-2929 or (520) 290-5508

Internet Address: <http://www.fmnetnews.com>

National Fibromyalgia Research Association

Phone Number(s): (503) 588-1411

Internet Address: <http://www.nfra.net>

This fact sheet was abstracted primarily from publications of the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS).

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